



COOK COUNTY HEALTH & HOSPITALS SYSTEM

Finance Dashboard: October 2015



Finance Dashboard: Oct 2015

Key Measures	2013	2014	2015 [#]	Change From Prior Period	FYTD'15 Budget or Goal	% To Budget or Goal
Days in Patient Accounts Receivable (Net)*	48	37	38	2.7% ↑	49.8	-23.7%
Days Cash on Hand	50	96	57	-40.6% ↓	197.6	-71.2%
Days Expense in Accounts and Claims Payable	36	42	68	61.9% ↑	63.4	7.3%
Overtime as Percentage of Gross Salary	8.2%	8.3%	7.1%	-14.5% ↓	5.0%	42.0%
CareLink/Charity Write-offs (at cost)	\$251,524,764	\$173,942,176	\$217,064,230	24.8%		
Bad Debt Expense (at cost)	\$309,691,828	\$168,427,323	\$185,902,126	10.4%		
Inpatient Days (monthly average)	9,225	8,752	8,422	-3.8% ↑	8,315	1.3%
Outpatient Clinic Registrations (monthly average)	80,989	78,021	77,431	-0.8% ↓	85,824	-9.8%
Emergency Room Visits (monthly average)	14,261	12,887	12,420	-3.6% ↓	12,887	-3.6%

Data through Sept 2015

^ This represents direct charity care write-offs to gross accounts receivable

* Data above does not include CountyCare information



CountyCare Income Statement
September-2015

YTD Member Months

	310,119	826,671	1,346,976	1,516,810
	YTD 1 st Quarter-2015	YTD 2 nd Quarter-2015	YTD 3 rd Quarter-2015	YTD September-2015
Revenue				
PMPM	\$ 158,557,089	\$ 417,547,277	\$ 670,743,914	\$ 748,457,964
Administrative Reimbursement	-	1,578,461	3,063,878	3,063,878
State Workers	470,044	1,188,547	1,633,262	1,895,104
Assessment Tax from Cash Advance	10,000	10,000	10,000	10,000
Total Revenue	\$ 159,037,133	\$ 420,324,285	\$ 675,451,054	\$ 753,426,946
Application Processing Costs				
Hoyne Facility Expenses	\$ 67,688	\$ 138,543	\$ 206,734	\$ 228,410
Application Assistance Fees	3,835,699	6,889,918	8,875,012	8,879,280
State Workers Cost	940,089	2,377,097	3,266,529	3,790,213
Total Application Processing Costs	\$ 4,843,476	\$ 9,405,559	\$ 12,348,274	\$ 12,897,903
Administrative Expenses				
Salaries & Benefits	\$ 516,925	\$ 1,095,516	\$ 1,614,141	\$ 1,783,829
Stop Loss Insurance	530,541	1,737,908	2,135,989	2,235,510
Self Insurance	96,864	193,729	290,593	322,881
Pharmacy Benefits Manager (PBM)	1,605,704	3,488,391	6,523,205	7,156,519
TPA Fees	15,126,618	37,365,170	63,790,087	64,925,146
Dental TPA Fee		582,066	955,443	1,074,172
Care Management Analytics	1,247,591	3,033,401	5,046,066	5,638,690
Other	120,552	1,813,991	2,919,748	3,795,811
Total Administrative Expenses	\$ 19,244,794	\$ 49,310,171	\$ 83,275,272	\$ 86,932,559
Clinical Expenses				
CCHHS Claims	\$ 52,840,141	\$ 81,032,463	\$ 114,145,324	\$ 122,339,312
Non-CCHHS Claims	43,700,515	104,770,198	178,848,409	205,091,806
Non-CCHHS Claims IBNR & MLR Reserve	294,421	71,622,778	100,054,271	115,279,156
Pharmacy	27,201,257	62,873,839	105,795,662	120,578,525
Domestic Pharmacy	2,906,927	7,197,678	11,882,323	13,422,539
Care Management	3,218,927	8,240,049	17,544,675	19,696,519
Behavioral Health	4,236,848	11,020,761	23,382,677	25,970,203
Optical	959,392	2,034,614	5,260,456	5,523,988
Transportation	764,435	2,356,531	3,566,418	3,866,418
Dental	197,148	3,766,275	9,652,114	10,320,679
Total Clinical Expenses	\$ 136,320,010	\$ 354,915,185	\$ 570,132,327	\$ 642,089,144
Medical Loss Ratio (MLR)	86.0%	85.0%	85.0%	85.8%
Total Expenses	\$ 160,408,280	\$ 413,630,915	\$ 665,755,874	\$ 741,919,607
CountyCare Net Income	\$ (1,371,148)	\$ 6,693,370	\$ 9,695,180	\$ 11,507,339



YTD September-2015 (In Thousands)

CCHHS Totals				
	2015 Actual	2015 Budget	2015 Budget Variance	2014 Actual
REVENUE:				
Net Patient Service Revenue	1,287,085	1,131,077	156,008	1,025,401
Other Revenue	6,827	6,705	123	6,349
TOTAL REVENUE	1,293,912	1,137,781	156,131	1,031,750
OPERATING EXPENSES:				
Salaries and Benefits	589,878	556,793	(33,085)	540,663
Supplies	162,868	169,178	6,310	212,088
Purchased Svs, Rental & Other	650,133	561,054	(89,078)	424,089
Claims Expense	10,500		(10,500)	
Insurance Expense	17,089	19,809	2,720	24,696
Depreciation	25,472	25,472		27,983
Utilities	9,583	12,956	3,373	9,165
TOTAL OPERATING EXPENSES	1,465,522	1,345,262	(120,260)	1,238,684
GAIN (LOSS) FROM OPERATIONS	(171,610)	(207,481)	35,871	(206,934)
NONOPERATING REVENUE	186,276	186,276		178,465
NET INCOME (LOSS)	14,666	(21,205)	35,871	(28,469)



YTD September-2015 (In Thousands)

	All Providers				CountyCare				All Provider & CountyCare Eliminations			
	2015 Actual	2015 Budget	2015 Budget Variance	2014 Actual	2015 Actual	2015 Budget	2015 Budget Variance	2014 Actual	2015 Actual	2015 Budget	2015 Budget Variance	2014 Actual
REVENUE:												
Net Patient Service Revenue	669,430	668,184	1,246	470,672	753,417	756,523	(3,106)	554,729	(135,762)	(293,630)	157,868	
Other Revenue	6,037	5,039	998	4,661	10		10					
TOTAL REVENUE	675,467	673,223	2,245	475,333	753,427	756,523	(3,096)	554,729	(135,762)	(293,630)	157,868	
OPERATING EXPENSES:												
Salaries and Benefits	526,751	501,242	(25,509)	483,878	1,784	1,770	(14)	927				
Supplies	89,370	106,397	17,026	79,118	78,944	55,374	(23,570)	131,878	(13,423)		13,423	
Purchased Svs, Rental & Other	111,822	142,242	30,420	(33,958)	658,634	708,955	50,321	456,495	(122,339)	(293,630)	(171,291)	
Claims Expense	10,500		(10,500)									
Insurance Expense	12,976	19,809	6,833	18,146	2,558		(2,558)	4,309				
Depreciation	25,258	25,258		27,766								
Utilities	9,445	12,828	3,383	9,080		47	47	28				
TOTAL OPERATING EXPENSES	786,121	807,774	21,653	584,030	741,920	766,146	24,226	593,636	(135,762)	(293,630)	(157,868)	
GAIN (LOSS) FROM OPERATIONS	(110,654)	(134,552)	23,898	(108,697)	11,507	(9,622)	21,130	(38,907)				
NONOPERATING REVENUE	122,429	122,429		136,289	145	145		75				
NET INCOME (LOSS)	11,775	(12,123)	23,898	27,592	11,653	(9,477)	21,130	(38,832)				



**COOK COUNTY HEALTH
& HOSPITALS SYSTEM**
CC+HHS

YTD September-2015 (In Thousands)

	Detainees				Dept of Public Health			
	2015 Actual	2015 Budget	2015 Budget Variance	2014 Actual	2015 Actual	2015 Budget	2015 Budget Variance	2014 Actual
REVENUE:								
Net Patient Service Revenue								
Other Revenue	0		0	2	780	1,666	(886)	1,687
TOTAL REVENUE	0		0	2	780	1,666	(886)	1,687
OPERATING EXPENSES:								
Salaries and Benefits	51,273	44,419	(6,854)	43,674	10,070	9,362	(708)	12,184
Supplies	7,937	7,293	(644)	861	40	115	75	231
Purchased Svs, Rental & Other	1,334	2,382	1,047	859	682	1,106	424	693
Claims Expense								
Insurance Expense	1,244		(1,244)	1,790	311	0	(311)	453
Depreciation	201	201		201	13	13		16
Utilities	2	5	3	6	136	77	(59)	51
TOTAL OPERATING EXPENSES	61,991	54,299	(7,692)	47,390	11,252	10,673	(579)	13,628
GAIN (LOSS) FROM OPERATIONS	(61,991)	(54,299)	(7,691)	(47,388)	(10,472)	(9,007)	(1,465)	(11,941)
NONOPERATING REVENUE	59,346	59,346		33,380	4,356			8,720
NET INCOME (LOSS)	(2,645)	5,047	(7,691)	(14,008)	(6,117)	(4,651)	(1,465)	(3,221)



Cook County Health Facilities
Combining Balance Sheet of General Funds (Unaudited)
(In Thousands)
Fiscal Year to Date September 30, 2015

	<u>Stroger Hospital</u>	<u>ACHN (Clinics)</u>	<u>County Care</u>	<u>Stroger, ACHN & County Care</u>	<u>O F C (Oak Forest)</u>	<u>Provident Hospital</u>	<u>Bureau of Health</u>	<u>Acute Care</u>	<u>Dept of Public Health</u>	<u>Cermak</u>	<u>Intra- Activity Eliminations</u>	<u>Grand Total</u>
ASSETS												
CURRENT ASSETS:												
Cash and cash equivalents:												
Cash in banks	3,944	0		3,944	23	815		4,782				4,782
Cash held by Cook Co Treas	844,256		380,485	1,224,741	97,160	123,066		1,444,966	144,585		(1,428,269)	161,283
Due from working cash fund	60,540	34,607		95,147				95,147				95,147
Total cash & cash equivalent	908,740	34,608	380,485	1,323,833	97,183	123,880		1,544,896	144,585		(1,428,269)	261,212
Property taxes receivable:												
Tax levy - current year	8,904	33,384		42,288	885	1,252	26,386	70,811	1,286	52,700		124,797
Tax levy - prior year	2,637	2,988		5,625	332	452	351	6,760	688	531		7,979
Total property taxes rec	11,541	36,372		47,913	1,216	1,705	26,736	77,571	1,974	53,231		132,776
Receivables:												
Patient AR-net of allowances	64,246			64,246		1,376		65,623				65,623
CCHHS claim receivable	135,762			135,762				135,762			(135,762)	
Third-party settlements	21,112			21,112		1,461		22,573				22,573
Other receivables	1,691	7	332	2,029	0	185	455	2,670				2,670
Due from State			246,553	246,553				246,553				246,553
Total receivables	222,811	7	246,884	469,702	0	3,022	455	473,180			(135,762)	337,418
Inventories	3,449			3,449	240	1,151		4,840		378		5,218
TOTAL CURRENT ASSETS	1,146,540	70,987	627,370	1,844,897	98,640	129,758	27,191	2,100,486	146,559	53,609	(1,564,031)	736,623
CAPITAL ASSETS:												
Depreciable assets - net	325,057	3,786		328,843	24,070	20,781	7,053	380,747				381,035
7 TOTAL ASSETS	1,471,598	74,773	627,370	2,173,740	122,709	150,539	34,244	2,481,232	146,562	53,895	(1,564,031)	1,117,658



Cook County Health Facilities
Combining Balance Sheet of General Funds (Unaudited)
(In Thousands)
Fiscal Year to Date September 30, 2015

	<u>Stroger Hospital</u>	<u>ACHN (Clinics)</u>	<u>County Care</u>	<u>Stroger, ACHN & County Care</u>	<u>O F C (Oak Forest)</u>	<u>Provident Hospital</u>	<u>Bureau of Health</u>	<u>Acute Care</u>	<u>Dept of Public Health</u>	<u>Cermak</u>	<u>Intra- Activity Eliminations</u>	<u>Grand Total</u>
LIABILITIES & NET POSITION												
CURRENT LIABILITIES:												
Due to Cook County Treasurer		95,769		95,769			1,174,681	1,270,450		157,819	(1,428,269)	
Accounts payable	25,669	446	34	26,149	388	1,890	32,401	60,828	190	287		61,306
Claims Payable	10,500		373,993	384,493				384,493			(135,762)	248,731
Accrued salaries, wages, & other liabilities	40,084	5,949	96	46,128	913	3,988	3,887	54,916	764	5,322		61,002
Compensated absences	4,171	512	13	4,696	269	555	104	5,623	150	399		6,172
Unearned revenue	60,615			60,615		2,795		63,411				63,411
Third-party settlements	39,000		73,000	112,000				112,000				112,000
Due to other co govt funds	21			21	10	5		36	7			43
Due to others	2,261			2,261	20			2,281				2,281
Due to State			262	262		5,087		5,349				5,349
Interaccount payabl (recevbl)	121,548	(176,700)	212,622	157,471	18,771	62,979	(247,677)	(8,457)	2	8,455		
TOTAL CURRENT LIABILITIES	303,870	(74,024)	660,019	889,865	20,371	77,299	963,396	1,950,931	1,113	172,283	(1,564,031)	560,296
LONG-TERM LIABILITIES:												
Compensated absences	23,638	2,900	74	26,612	1,523	3,143	588	31,865	849	2,263		34,977
Reserve-tax objection suits	3,764	4,437		8,201	491	671	380	9,744	1,083			10,827
TOTAL LIABILITIES	331,273	(66,687)	660,093	924,679	22,385	81,113	964,364	1,992,541	3,045	174,546	(1,564,031)	606,100
NET POSITION:												
Investment in capital assets	325,057	3,786		328,843	24,070	20,781	7,053	380,747	3	286		381,035
Unrestricted	815,268	137,674	(32,723)	920,218	76,254	48,645	(937,173)	107,945	143,515	(120,937)		130,523
TOTAL NET POSITION	1,140,325	141,460	(32,723)	1,249,061	100,324	69,426	(930,120)	488,692	143,518	(120,651)		514,958
TOTAL LIABILITIES & NET POSITION	1,471,598	74,773	627,370	2,173,740	122,709	150,539	34,244	2,481,232	146,562	53,895	(1,564,031)	1,117,658



COOK COUNTY HEALTH & HOSPITALS SYSTEM



Human Resources Metrics for CCHHS Board Of Directors October 30, 2015

Gladys Lopez, Chief of Human Resources



**COOK COUNTY HEALTH
& HOSPITALS SYSTEM**
CCHHS

Human Resources Metrics Summary

Gladys Lopez, Chief of Human Resources

DATA THROUGH: 09/30/15

Net New: 240

December 1, 2014 - September 30, 2015

VACANCIES FILLED

	Quarter 1	Quarter 2	Quarter 3	Quarter 4 ¹	FY14 TOTAL	FY15 TOTAL	VARIANCE
CCHHS External	167	162	266	105	371	700	329 ▲ 89%
CCHHS Internal	88	120	140	37	249	385	136 ▲ 55%
Total CCHHS:	255	282	406	142	620	1085	465 ▲ 75%
Nursing External	47	55	75	16	132	193	61 ▲ 46%
Nursing Internal	24	65	59	11	96	159	63 ▲ 66%
Total Nursing:	71	120	134	27	228	352	124 ▲ 54%

SEPARATIONS

CCHHS Separations	206	97	114	43	359	460	101 ▲ 28%
Total Net New CCHHS:	(39)	65	152	62	12	240	228 ▲ 1900%
Nursing Separations	60	22	21	10	106	113	7 ▲ 7%
Total Net New Nursing:	(13)	33	54	6	26	80	54 ▲ 208%

TURNOVER

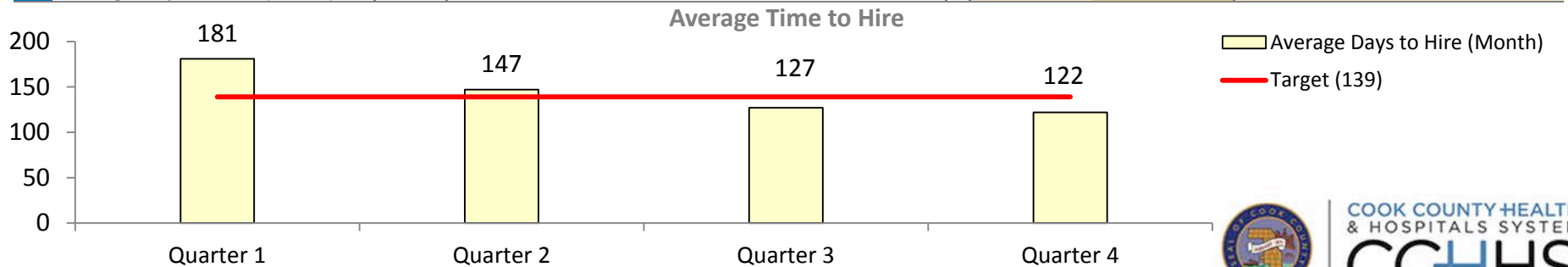
CCHHS FTEs	6095	6287	6272	6340	6105	6340	235 ▲ 4%
Total CCHHS Turnover:	3.4%	1.5%	1.8%	0.7%	5.9%	7.3%	1.4% ▲ 23%
CCHHS New Hire FTEs	167	162	266	105	371	700	329 ▲ 89%
CCHHS New Hire Separations	7	16	11	11	15	45	30 ▲ 200%
Total FY15 New Hire Turnover:	4%	9%	3%	3%	4.0%	6.4%	2.4% ▲ 59%

OPEN VACANCIES

Total CCHHS Vacant Positions:	1,066	1,048	997	804	--	804	804
Total RTHs in HR (In Process):	734	844	704	466	864	466	466

AVERAGE TIME TO HIRE

	Target
Average Days to Hire (Month):	139
Quarter 1	181
Quarter 2	147
Quarter 3	127
Quarter 4	122
FY14	203
FY15	142
Variance	-61 ▲ 2%



¹ Data thru 09/30/15



COOK COUNTY HEALTH
& HOSPITALS SYSTEM
CCHHS

CountyCare Report & Deep Dive Discussion

Prepared for: CCHHS Board of Directors

Steven Glass, Executive Director, Managed Care

October 30, 2015



Metrics Snapshot

Key Measures	Jul'15	Aug'15	Sep'15	Oct'15	% Change From Prior Month	Trend	FYTD'15 Budget or Goal	% to Budget/Goal
Monthly Membership	172,873	170,834	169,802	168,749	-0.6%	--	158,349	106.6%
ACA	82,058	79,454	78,058	76,910	-1.5%	▼	78,119	98.5%
FHP	87,949	88,333	88,553	88,538	0.0%	--	74,506	118.8%
SPD	2,866	3,047	3,191	3,301	3.4%	▲	5,724	57.7%
Home/Community Waiver (incl DD)	539	565	583	593	1.7%	▲		
LTC	174	189	185	201	8.6%	▼		
FYTD Member Months	1,169,503	1,340,337	1,510,139	1,678,888			1,631,305	102.9%
ACA	668,043	747,497	825,555	902,465			875,335	103.1%
FHP	482,382	570,715	659,268	747,806			706,048	105.9%
SPD	19,078	22,125	25,316	28,617			49,923	57.3%
Risk Management								
<u>Pharmacy</u>								
# Scripts/Utilizer	3.00	2.90	2.90		0.0%	--		
% Generic dispensing	83%	82%	81%		-1.3%	▼		
% Brand Single Source	17%	17%	18%		8.2%	▼		
% Formulary	98%	98%	98%		0.0%	--	98%	0.0%
% CCHHS HIV pt meds @ CCHHS pharmacy	36.0%	34.1%	35.9%		5.3%	▲	80%	-44.1%
% Maintenance Rx on Extended Supply (>84 days)	45.7%	55.8%	47.1%		-15.6%	▼	85%	-37.9%
Care Management								
<u>PCMH Assignment</u>								
% Members Assigned to PCMH	99.6%	99.9%	99.7%		-0.2%	--		
% Members Unassigned	0.4%	0.1%	0.3%		433.9%	▼		
ACA Utilization Management (rolling 12 month)							Nov'14 Baseline	
Admits/1,000 member months	160	156	159		1.9%	▼	168	-7.1%
Bed Days/1,000 member months	702	689	695		0.9%	--	737	-6.5%
ED Visits/1,000 member months	949	926	927		0.1%	--	1,017	-8.9%
% 30-day Readmissions	22%	22%	21%		-4.5%	▲	20%	10.0%

Metrics Snapshot

Key Measures	Jul'15 YTD FY'15 Q1 Dec-Feb (N=321,297)	Aug'15 YTD FY'15 Q2* Mar-May (N=362,038)	Sep'15 YTD FY'15 Q3* Jun-Aug (N=306,623)	Oct'15	% Change From Prior Month % Change from Q2 to Q3*	Trend	FYTD'15 Budget or Goal FY'14 Q4 Benchmark (Sep-Nov)	% to Budget/Goal
<u>ACA CCHHS Utilization</u> (since 7/1/2014)								
Emergency Room	16.8%	12.3%	10.4%		-14.8%	▼	17.2%	-4.9%
Hospital Inpatient	8.5%	6.7%	6.3%		-6.4%	▼	10.9%	-4.2%
Hospital Outpatient	28.8%	32.2%	30.6%		-4.9%	▼	28.8%	3.4%
Other Medical	1.3%	1.5%	1.3%		-12.0%	▼	1.1%	0.4%
Primary Care	41.1%	36.1%	34.2%		-5.3%	▼	39.8%	-3.7%
Specialist	10.6%	4.7%	2.5%		-47.8%	▼	6.8%	-2.1%
Total	19.5%	15.9%	14.1%		-11.4%	▼	19.1%	-3.2%
Operations								
<u>Call Center</u>							Goal	Goal Met
Abandonment rate	1.4%	2.2%	1.3%		-39.5%	▲	<4%	Y
Hold time	0:00:49	0:00:53	0:00:56		5.7%	▼	< :01:00	Y
Average speed to answer	0:00:14	0:00:23	0:00:14		-39.1%	▲	< :00:45	Y
<u>Claims Processing</u>								
	FY'15 Q1	FY'15 Q2	FY'15 Q3		Change from Prior Q		# Days	Goal Met
Avg # Days Received-to-Processed (non-adjusted)	5	5	4		-20.0%	▲	< 8	Y
Avg # Days Received-to-Paid/Pend (non-adjusted)	32	36	31		-13.9%	▲	< 35	Y

* Data incomplete pending claims run-out.

Health Plan Performance Management

Operations

- Membership
- Risk Management
- Care Management
- Operational Measures
- Delegated Vendor Oversight

Clinical Care

- HEDIS
- Quality of Care Reviews
- Peer Review
- Credentialing

Members & Providers

- Utilization
- Cost
- CAHPS
- Grievances
- Appeals
- Fraud, Waste & Abuse
- Network Development

CAHPS Survey

- Consumer Assessment of Healthcare Providers and Systems (CAHPS)
- Established and operated by US Department of Health and Human Services (HHS), Agency for Healthcare Research and Quality (AHRQ)
- Many types of surveys:
 - Health Plan
 - Amer Ind Hlth Svcs
 - Nursing Home
 - Clinicians & Groups
 - Dental Plan
 - Hospital
 - Surgical Care
 - Home Health
 - Dialysis
- Health Plan survey established in 1997

Source: <https://cahps.ahrq.gov/Surveys-Guidance/HP/index.html>

What's Surveyed

- CAHPS surveys ask patients to report on their experiences with health plans and their services.
- Commercial and Medicaid surveys are exactly the same except for the time referent:
 - Commercial questionnaire = previous 12 months
 - Medicaid questionnaire = previous 6 months
- Four key focus areas:
 - Getting needed care
 - Getting care quickly
 - How well doctors communicate
 - Health plan information & customer service



CountyCare 2015 CAHPS Survey

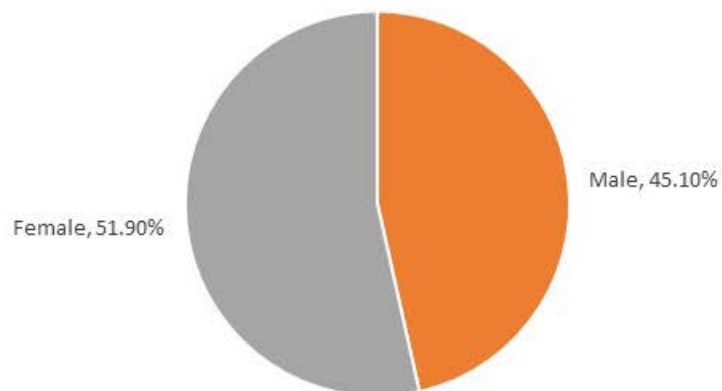
- Annual requirement in MCCN
- Surveys conducted January-May (pre-FHP mandatory implementation)

	Required	Actual	% Difference
Sample Size	1,350	1,755	+30.0%
Valid Surveys	411	689	+67.6%
Response Rate	30.4%	39.3%	+29.0%

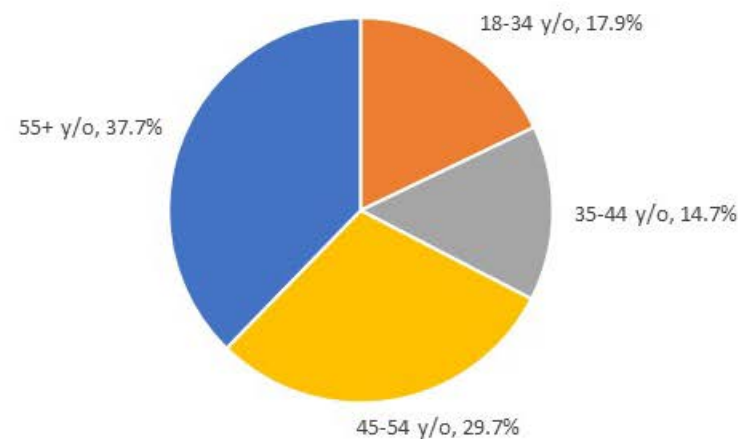
- 52% Mail; 42% Phone; 6% Internet
- 44 Spanish-language surveys completed (6%)

Respondent Profile

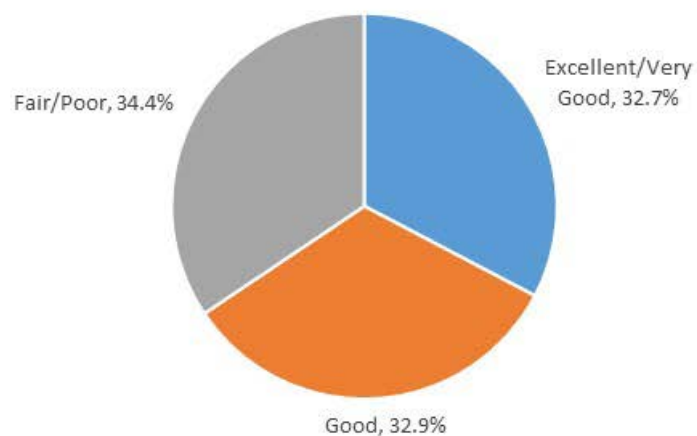
Gender



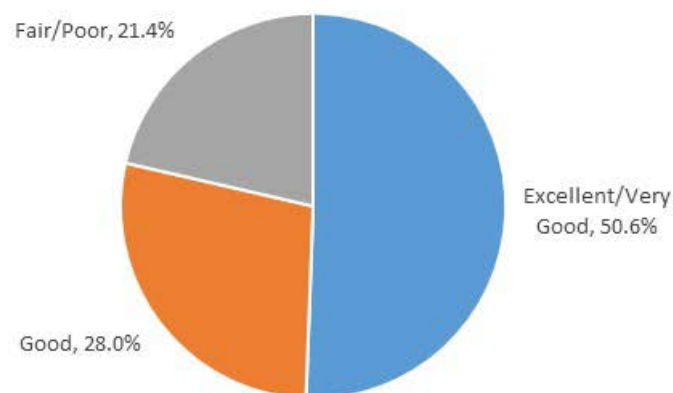
Age Group



Health Status



Mental/Emotional Health Status



Trend & Benchmark Comparisons

Composites, Attributes & Key Questions	2015 Valid # and Most Favorable Response %		2015 Comparison* (N=58)	2014 All Plans** (N=147)
Getting Needed Care	476	75.2%	80.5%	80.5%
Getting Care Quickly	455	79.1%	79.9%	81.0%
How Well Doctors Communicate	406	89.7%	90.3%	89.5%
Customer Service	299	89.1%	86.6%	86.5%
Shared Decision Making	229	76.6%	78.9%	NA
Health Promotion & Education	486	76.5%	71.2%	71.6%
Coordination of Care	194	83.5%	81.3%	79.2%
Providing Needed Information	207	69.1%	68.2%	66.7%
Ease of Filling Out Forms	595	94.1%	93.2%	94.2%

Significance Testing (95% level)		
Significantly Higher Than Trend/Benchmark	Significantly Lower Than Trend/Benchmark	No Significant Difference

Comparison Key
* 2015 Comparison = All Medicaid plans with same vendor (N=58)
** 2014 All Plans = All Medicaid adult samples submitted to NCQA in 2014 (N=147)



Benchmark Comparisons

Composites, Attributes & Key Questions	CountyCare		2015 Mean & Percentile**				
	Most Favorable Response %	Percentile	Mean	25 th	50 th	75 th	90 th
Getting Needed Care	75.2%	12 th	80.5%	77.7%	81.5%	84.2%	84.9%
Getting Care Quickly	79.1%	35 th	79.9%	77.5%	80.9%	83.2%	84.5%
How Well Doctors Communicate	89.7%	32 nd	90.3%	89.4%	90.6%	91.6%	92.5%
Customer Service	89.1%	83 rd	86.6%	84.6%	87.1%	88.6%	90.0%
Shared Decision Making	76.6%	23 rd	78.9%	76.7%	78.9%	81.1%	83.0%
Health Promotion & Education	76.5%	92 nd	71.2%	68.7%	71.3%	74.7%	76.2%
Coordination of Care	83.5%	67 th	81.3%	78.3%	81.3%	84.7%	86.6%
Providing Needed Information	69.1%	60 th	68.2%	66.3%	68.6%	71.2%	74.1%
Ease of Filling Out Forms	94.1%	69 th	93.2%	92.6%	93.4%	94.3%	95.9%

Comparison Key

*Ranking = Comparison to all Medicaid plans with same vendor (N=58)

**2015 Analytics = Analysis of all Medicaid plans with same vendor (N=58)

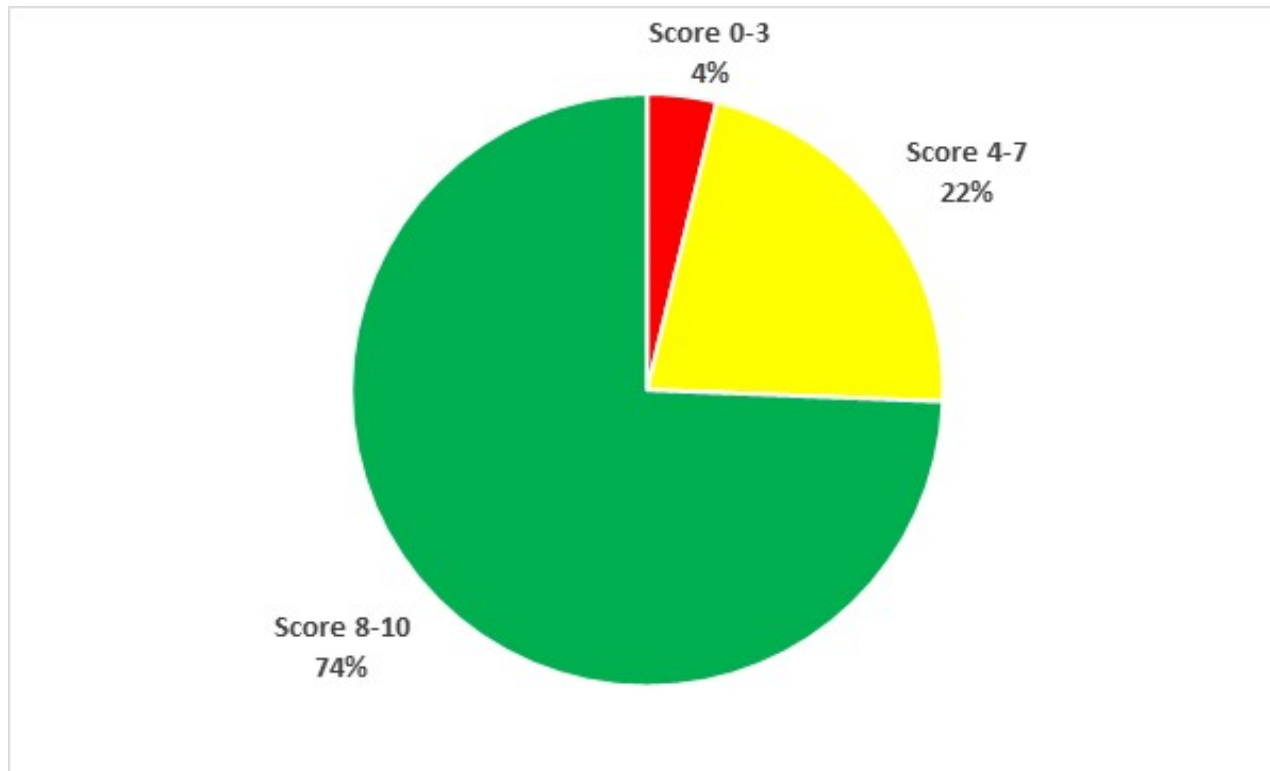


Board of Directors | Oct 30, 2015

What Number Would You Use to Rate Your Health Plan? (Q35)

0-10 Scale

0='Worst health plan possible', 10='Best health plan possible'



[return to summary results](#)

NCQA Health Insurance Plan Ratings 2015-2016 - Detail Report (Medicaid)

Plan Name: Meridian Health Plan of Illinois
URL: www.medicaremeridian.com/ill
States: IL
Rating: 4.0
NCQA Accreditation: Yes

Lower Performance Higher Performance
1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0

Plan Details	Score
Consumer Satisfaction	3.0
Getting care	2.5
Getting care easily Did members get appointments, preventive care, tests, and treatment easily?	2.0
Getting care quickly Did members get appointments, preventive care, tests, and treatments promptly?	3.0
Satisfaction with physicians	3.5
Rating of primary-care doctor Did members rate their primary-care doctors high overall?	3.0
Rating of specialists Did members rate specialists high overall?	5.0
Rating of...	3.0
	2.0
	4.0
	3.5
	3.0
	4.0
	3.5
	3.0

NCQA Health Insurance Plan Ratings 2015 - 2016

NCQA Health Insurance Plan Ratings 2015-2016 - Summary Report (Medicaid)

Search for a health insurance plan by state, plan name or plan type (Private, Medicaid, Medicare). Click a plan name for details.
NCQA rated more than 1,300 health insurance plans based on clinical quality, member satisfaction and NCQA Accreditation Survey results. This new way of rating plans emphasizes care outcomes (the results of care people receive) and what patients say about their care.
Information about the ratings, including how they are calculated, is here. To license the underlying data, go here.

Lower Performance Higher Performance
1.0 1.5 2.0 2.5 3.0 3.5 4.0 4.5 5.0

Rating	Plan Name	States	Type	NCQA Accreditation	Consumer Satisfaction	Prevention	Treatment
4.0	Meridian Health Plan of Illinois	IL	HMO	Yes	3.0	3.0	3.0
2.5	Harmony Health Plan of Illinois	IL	HMO	No	1.5	2.0	2.5
2.5	Molina Healthcare of Illinois	IL	HMO	No	2.5	1	2.5
2.0	Aetna Better Health	IL	HMO	Yes	1	1	1
Partial Data Reported	IllinCare Health Plan	IL	HMO	No			
No Data Reported	Community Care Alliance of Illinois	IL	HMO	No			
No Data Reported	CountyCare Health Plan	IL	HMO	No			
No Data Reported	Family Health Network	IL	HMO	No			
No Data Reported	Health Alliance Connect (Aged/Blind/Disabled)	IL	HMO	No			
No Data Reported	Health Alliance Connect (IL Medicaid)	IL	HMO	No			

• NCQA Accreditation is as of June 30, 2015
• In Insufficient data; NA = Not Applicable; NR = Not Reported
• Specific plan demographic data are supplied by AIS's Directory of Health Plans. Atlantic Services, Inc. (www.AISHealth.com)
• Contact us at my.ncqa.org to ask about customized ratings summaries.
• † Indicates Special Needs Plan (SNP), according to CMS

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Comparison With Illinois Plans

- NCQA posts Health Insurance Plan Rankings on 5-point scale, using 0.5 increments (1.0, 1.5, 2.0, etc.)
- CAHPS survey calculates results on a 3-point scale (1.0-3.0)
- For comparison, converted CountyCare's 3-point scores to a 5-point scale assuming equal proportion
 - E.g. Score $2.4/3 = 0.81 \times 5 = 4.0$; or
 - $2.4 = 81\%$ of 3; $4.0 = 81\%$ of 5
- 5-point methodology likely to differ from NCQA

Calculated Comparison With NCQA- Reporting Illinois Medicaid Plans

	As Reported by NCQA				As Calculated Internally
	Meridian	Harmony	Molina	Aetna Better Health	CountyCare
Consumer Satisfaction	3.0	1.5	2.5	3.0	4.0
Getting Care	2.5	1.0	2.0	2.5	3.8
Getting Care Easily	2.0	1.0	2.0	2.0	3.8
Getting Care Quickly	3.0	1.0	2.0	3.0	3.9
Satisfaction With Physicians	3.5	1.5	3.0	3.5	4.1
Rating of Primary-care doctor	3.0	1.0	3.0	2.0	4.3
Rating of Specialists	5.0	NA	3.0	4.0	4.2
Rating of Care	3.0	1.0	3.0	2.0	3.9
Coordination of Care	2.0	NA	3.0	4.0	4.2
Health Promotion and Education	4.0	2.0	2.0	5.0	4.0
Satisfaction with Health Plan Services	3.5	2.0	3.0	2.0	4.2
Rating Health Plan	3.0	2.0	2.0	2.0	4.0
Customer service	4.0	NA	4.0	2.0	4.3
Key:	1.0, 1.5, 2.0	2.5, 3.0, 3.5	4.0, 4.5, 5.0		

CAHPS Next Steps

- Utilize upcoming Enrollee Advisory Committee (EAC) meetings as focus group sessions to obtain more depth of information
- Identify performance improvement interventions and establish CAHPS targets
- Incorporate measures into performance metrics